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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)
FY 2005 (Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818))		95176562-005004
Application Number	09/940,545	Filed 08/29/2001
For Plasticized Bone and Soft Tissue Grafts ...		
Art Unit	3732	Examiner David Comstock
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card, Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>3740-0355</u> . I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the	<input type="checkbox"/> applicant/inventor. <u>50-3420</u> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/99). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>39,292</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34	
<u>W. Jackson Matracy, Jr.</u>		<u>September 13, 2005</u>
Signature		Date
W. Jackson Matracy, Jr.		Telephone Number
Typed or printed name		
NOTE: Only one of all the inventors or assignees (or record of the entire interest or their representative(s)) is required. SIGNATURES multiple lines & more than one signature is required, see below.		
<input checked="" type="checkbox"/> "I attest on behalf of the above named inventor(s) or assignee(s) that the above signed forms are submitted.		

The collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PAGE 16/19 * RCVD AT 5/4/2006 12:36:13 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-2/2 * DNI:2738300 * CSID: * DURATION (mm:ss):04:42

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Approved for use through 6/30/2001 QMB 060-10031

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FY 2005 <small>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4810))</small>		95176562-005004
Application Number	09/940,545	Filed 08/29/2001
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Art Unit 3732	Examiner David Comstock	
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<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>3740-0355</u> . I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>39,292</u> .		
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34		
<u>W. Jackson Matney, Jr.</u> Signature		September 13, 2001 Date
W. Jackson Matney, Jr. Typed or printed name		262-835-1678 Telephone Number

NOTE: Separation of all the interests of a single or of two or more of the entire interest or their representative(s) are required. Shows multiple names & some other

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The collection of information is required by 37 CFR 1.40(a). The information is required in order to obtain a benefit by the public which is to be used by the USPTO in processing an application. Confidentiality is guaranteed by 36 USC 128 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments or requests for extension of time you desire in completing this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, USPTO Patent and Trademark Office, 1811 F Street, N.W., Washington, DC 20530. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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